

SERIAL NUMBER 09/096,500	FILING DATE 06/12/98	CLASS <del>800</del> 530	GROUP ART UNIT <del>1633</del> 1646	ATTORNEY DOCKET NO. P1110P1
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APPLICANT  
 AVI J. ASHKENAZI, SAN MATEO, CA; KEVIN P. BAKER, SAN MATEO, CA; ANAN CHUNTHARAPAI, COLMA, CA; AUSTIN GURNEY, BELMONT, CA; KYUNG JIN KIM, LOS ALTOS, CA; WILLIAM I. WOOD, SAN MATEO, CA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
 VERIFIED PROVISIONAL APPLICATION NO. 60/049,911 06/18/97  
CME

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
 VERIFIED NONE  
CME

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
 VERIFIED NONE  
CME

FOREIGN FILING LICENSE GRANTED 09/03/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged <u>CME</u> Examiner's Initials _____	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 18	TOTAL CLAIMS 54	INDEPENDENT CLAIMS 31
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ADDRESS  
 DIANE L MARSCHANG  
 1 DNA WAY  
 SOUTH SAN FRANCISCO CA 94080-4990

TITLE  
 APO-2DCR

FILING FEE RECEIVED  \$3,964	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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